

PTO/SB/02B

Customer No.:022491

Docket No.: 8992070

DECLARATION AND POWER OF ATTORNEY

As a below named inventor (s), I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD FOR CONTROLLING HAND-OFF FOR HOME ZONE SERVICES IN A
MOBILE COMMUNICATIONS SYSTEM**

the specification of which is attached hereto unless the following box is checked:

☐ was filed on _____ as United States Application Number or PCT International Application
Number _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulation, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

| | | | |
|------------------------------|---------------------------------------|---|---|
| <u>1999-2350</u> (Number) | <u>Republic of Korea</u> (Country) | <u>26/01/1999</u> (Day/Month/Year Filed) | Priority Claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| _____ (Number) | _____ (Country) | _____ (Day/Month/Year Filed) | <input type="checkbox"/> Yes <input type="checkbox"/> No |

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of the Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulation, § 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

| | | |
|-------------------------------|------------------------|--|
| _____ (Application Number) | _____ (Filing Date) | _____ (Status - patented, pending, abandoned) |
| _____ (Application Number) | _____ (Filing Date) | _____ (Status - patented, pending, abandoned) |

POWER OF ATTORNEY: I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: **Steve S. Cha**, Registration No. 44,069; **Howard S. Reiter**, Registration No. 20,394.

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**022491**

PATENT TRADEMARK OFFICE

I (we) hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: **Jin-Soo Jeong**
Residence Address: Samhwan APT #2-511, Karakdong, Songpa-gu, Seoul,
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Post office address: Same as above
Citizenship: Republic of Korea
Date: January 24, 2000

Signature:

Full name of second inventor:
Residence Address:

Post office address:
Citizenship:
Date:

Signature:

Full name of third inventor:
Residence Address:
Post office address:
Citizenship:
Date:

Signature:

Full name of fourth inventor:
Residence Address:

Post office address:
Citizenship:
Date:

Signature: